

PART B - FEE(S) TRANSMITTAL

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Matthew T. Ridsdale
 BRINKS HOFER GILSON & LIONE
 P.O. Box 10395
 Chicago, Illinois 60610

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Matthew T. Ridsdale	(Depositor's name)
/Matthew T. Ridsdale/	(Signature)
March 24, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,492	07/23/2003	Susanne Marie Crockett	08285-00632	2000

TITLE OF INVENTION:

METHOD AND SYSTEM FOR PROVIDING ENHANCED CALL WAITING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	04/10/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS				

ADDY , THJUAN KNOWLIN 2614 379-215010

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122 attached).

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Brinks Hofer Gilson & Lione
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
 SBC Properties, L.P.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)
 Reno, Nevada

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Matthew T. Ridsdale/

Date March 24, 2008

Typed or printed name Matthew T. Ridsdale

Registration No. 56,832

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